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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314

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-03/09/01--01107--014
*****87.50 *****87.50

SUBJECT: Aron Eisenkeit, M.D., P.A.

Enclosed is an original and one (1) copy of the articles
of incorporation and a check for:

 \$ 70.00
Filing fee

 \$ 78.75
Filing fee &
Certificate

 \$ 78.75
Filing fee &
Certified Copy

X \$87.50
Filing fee,
Certified
Copy, &
Certificate

FROM: Aron Eisenkeit
12187 Cuddington Ct
Wellington, FL 33414
561-333-3130

NOTE: Please provide the original and one copy of the
articles.

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ARTICLES OF INCORPORATION
FOR

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Aron Eisenkeit, M.D., P.A.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

Aron Eisenkeit, M.D., P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business of this corporation shall be:

12989 Southern Blvd. Ste 201
Loxahatchee, FL 33470

The mailing address for this corporation shall be:

12187 Cuddington Ct.
Wellington, FL 33414

ARTICLE III PURPOSE

The purpose for which this corporation is organized is to provide general surgical services to the public.

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares of common stock, par value \$ 1.00 per share

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the registered agent of the Corporation is:

Aron Eisenkeit, M.D.
12187 Cuddington Ct.
Wellington, FL 33414

ARTICLE VI BOARD OF DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors consisting of no less than one director. The number of directors may be increased or decreased from time to time in accordance with the Bylaws of the Corporation.

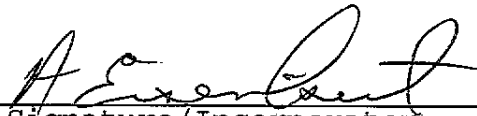
The election of directors shall be done in accordance with the Bylaws. The directors shall be protected from personal liability to the fullest extent permitted by law. The name of each initial member of the Corporation's Board of Directors are:

Aron Eisenkeit

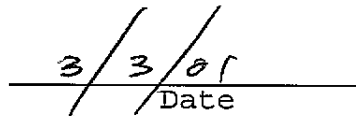
ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Aron Eisenkeit
12187 Cuddington Ct.
Wellington, FL 33414
561-333-3130




Signature/Incorporator
Aron Eisenkeit, M.D.

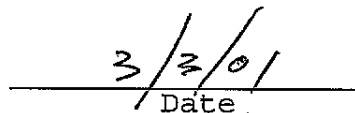


Date

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.



Signature/Registered Agent
Aron Eisenkeit, M.D.



Date